

Data Collection in the Home

A TEI Toolkit

Module 1: Understanding the Value of Data Collection



TRIBAL EVALUATION INSTITUTE

Supporting Community Decision Making by Strengthening Data Collection and Use

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Please contact us with any questions related to this toolkit and its use.

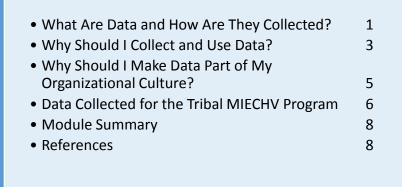






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MODULE 1: UNDERSTANDING THE VALUE OF DATA COLLECTION

This module will help home visitors and other data collectors understand the different types of data, methods for collecting data, and the role high-quality data can play in improving services to families. The module also addresses how program managers and evaluators can build a culture of quality data collection in their programs. We discuss what data are, how data can be

collected, and how they can be useful to you and the families your program serves. Every time you interact with a family, you capture data, even if those data are not collected in a formalized way. Data can be used in many different ways to improve and customize the services you provide and ultimately help the families in your program. We provide some activities to help you and your team understand the types of data, the ways in which data are already collected informally, and the data that can help answer your stakeholders' questions. We also provide a resource to help your team describe data collection requirements specific to the Tribal MIECHV initiative.

LEARNING OBJECTIVES:

By the end of this module, you will be able to:

- Recognize types of data and methods for collecting data.
- Understand the ways in which informal data collection happens every day.
- Identify important reasons to collect and use data.
- Apply strategies to incorporate data into your organizational structure.

ACTIVITIES:

- Activity 1.1: Quantitative vs. Qualitative Data
- Activity 1.2: Identifying Questions Data Can Help You Answer
- Activity 1.3: Recognizing Informal Data Collection

WHAT ARE DATA AND HOW ARE THEY COLLECTED?

Home visiting programs may use different types of data to improve their services to families and answer questions posed by staff, administrators, funders, and other stakeholders. In Western scientific frameworks, there are two types of data, quantitative and qualitative. Both types of data have value and can add understanding in different ways. You can use the activity at the end of this module, A stakeholder is a person, group, or organization that has interest in or is impacted by the activities of a program or other organization.

Quantitative vs. Qualitative Data, to help ensure that everyone on your team understands the difference between these types of data.

ACTIVITIES:

1.1: Quantitativevs. QualitativeData

Quantitative data can be counted or measured (i.e., numbers). Quantitative data collected from a study population can be compared with like data from larger populations or subpopulations. Examples of quantitative data include height, weight, and test scores. Home visitors may collect quantitative data through an observation of the home environment using a home observation checklist or a developmental or depression screening tool.

Qualitative data provide a description or characterization of a thing or phenomenon. They can be observed (e.g., attitudes, feelings, behaviors) but not counted. Usually, qualitative data describe individual cases rather than the entire program population. Some basic examples are eye color, make and model of a car, and gender. Another example might be home visitor observations of a home environment written in case notes (e.g., "The home was dark," "There were a ton of books in the home!").

The collection of quantitative and qualitative data often relies on multiple data collection methods. Data sources can include self-report interviews and surveys, direct observations, or administrative records, such as the following:

- Client self-report
 - Surveys
 - o Interviews
 - Assessments or standard program forms
 - Focus groups
- Observation
- Abstraction of administrative data or data from a third-party agency
 - Birth certificate data
 - o Electronic medical records
 - Medicaid claims

These terms are explained in the Definitions of Key Terms at the end of this module and are discussed further in Module 2.

Indigenous Ways of Knowing

Indigenous peoples have their own way of looking at the world, drawing from traditional knowledge gained through collecting many forms of data (Barnhardt & Kawagley, 2005). Through the sharing of oral histories, stories, observations, experiences, languages, and art, traditional knowledge has been passed down through

Indigenous knowledge is local knowledge rooted in a certain culture, region, or indigenous community.

generations and is now commonly known as indigenous ways of knowing or indigenous knowledge (Lambert, 2014). Rooted in place or community, indigenous ways of knowing are often central to survival and understanding of the physical world (i.e., hunting, farming, gathering food, making shelter, understanding seasonal changes) and can also be the basis of core beliefs, norms, values, and cultural practices (Dei, Hall, & Rosenberg, 2000). Think for a minute about the indigenous knowledge that has been passed down to you from your family members, community elders, or spiritual leaders. Consider how indigenous ways of knowing are or could be integrated into your home visiting program. How might including indigenous

ways of knowing influence the way in which you collect data from families within the community?

WHY SHOULD I COLLECT AND USE DATA?

There are many reasons to collect data about your program. You may want to use data to track program activities or the progress families are making. You may also want to use data to make program improvements or document changes and successes in your program over time. Increasingly, funders have required data collection from grantees implementing home visiting and other programs as part of performance measurement and evaluation. Data help funders see if the programs they are sponsoring have an impact, thus ensuring accountability for the use of funding. While funding agencies commonly use data to answer questions about programs, those responsible for planning and implementing the programs in communities can also use the data they collect to inform their own program planning, management, and sustainability. Data can be used in three key ways that are interrelated: (1) documenting program activities, (2) improving program services, and (3) determining program achievements.

Ways Data Can Be Used

Program Program Program **Documentation** Improvement Achievements • Tracking Demonstrating what • Telling the story of the happens in the program individual/family program Identifying progress • Planning for and individual/family needs • Evaluating the quality of ensuring program

- Planning and testing new approaches
- home visits and lesson delivery
- sustainability
- Determining whether the program "works"

Data can be used to answer the following questions you may have about your home visiting program:

- What is happening in my program? You can use data to track program activities and progress to ensure your program is meeting its goals, activities are happening as planned, and the program is reaching the intended participants. For example, you can record data about:
 - Families who are participating
 - Visits that are completed
 - Referrals that are made
 - Community partnerships you have developed

- What do our children and families need? You can collect valuable information about the specific needs of children and parents with screening instruments and other tools. You can also collect data to better understand if children and families are reaching their goals, what their successes are, or what specific challenges they might have that need some extra attention. This information can be used to meet the needs of individual families in the program as well as to support community needs and readiness assessments.
- What happens during home visits, and how can we continue to improve services? You can use data to help you understand the quality of the home visit and lesson delivery and to make program improvements. This process is called continuous quality improvement (CQI). CQI can help you make informed changes to your program to improve services. Data on family satisfaction can provide the family's perspective on if and how the program is working and how it might be improved.

CQI, continuous quality improvement, is a strategy for thoughtfully using data to improve services by testing small, measurable changes. CQI often relies on a framework, such as the Plan-Do-Study-Act (PDSA) cycle, for understanding a problem and testing a solution.

- How are families succeeding? You may want to know if your children and families are reaching goals or learn more about their experiences in the program. When you collect data from children and families, you can see their progress. You can also use these data to make sure that the children and families in your community are benefitting from the program.
- What is our story? There are many ways you can tell the story of your program. Data can help you show your program's successes and challenges. It's important to document all that your program accomplishes, so that you can celebrate your successes and validate all the hard work of your staff members. You can use data as evidence of what you have done and what happened as a result.
- How can I sustain my program? Having local, community-specific data is critical in securing future funding and building community buy-in for your program. Community members, program administrators, and tribal leaders may often want information about your program's achievements, and providing this information to them is important. Additionally, many grants require a program to collect and report on performance measures that demonstrate success before the funders commit to sustain or expand the program. When you have data, they can bolster your argument for sustaining your program.

ACTIVITIES:

1.2: Identifying Questions Data Can Help You Answer To further explore the types of questions you may need to answer with your data, you can use the activity at the end of this module, **Identifying Questions Data Can Help You Answer**. This activity focuses on the questions your various stakeholders might have about your program.

WHY SHOULD I MAKE DATA PART OF MY ORGANIZATIONAL CULTURE?

We understand that collecting data may seem overwhelming, burdensome, or confusing for some program staff. One of the aims of this toolkit is to help program managers and evaluators build buy-in among home visitors and other program staff for data collection. When your entire team understands the value of data, you can share what you know with colleagues, other stakeholders, and families. You can grow an organizational culture that appreciates data as part of the program, not an additional burden.

To create buy-in, program staff need to feel as though the information collected is meaningful to your program, your community, and beyond. Data are one part of the larger goal of improving program services, which can then improve the lives of families within the community. Also, sharing your achievements through data is one way to help other communities learn from the successes and challenges you have faced and begin to build on

ACTIVITIES:

1.3: RecognizingInformal DataCollection

what we know about effective home visiting programs in tribal communities. You can incorporate some of the strategies here to encourage buy-in. And remember, your program is already successfully collecting data, either informally or formally. We have included an activity at the end of this module, **Recognizing Informal Data Collection**, that can help your team identify interactions where data are already being collected.

Get Started Early

- Make data collection part of the planning process. It's never too early to start planning for the data collection that will occur within your program. For example, think ahead of time about the types of data that need to be collected and how they will be collected.
- Talk about data directly. During trainings and ongoing supervision, you can talk directly about the purpose and value of data collection. Recognize potential challenges to data collection with staff and brainstorm strategies to overcome challenges, always keeping the big picture in mind. For example, data collection may be time intensive, but it will lead to more reliable performance measures and ultimately improve services to families.

Get Everyone Involved

- Include home visitors and all staff in the data collection planning process. Each staff person has a unique understanding of the program and will have valuable ideas to contribute to the discussion on the collection, analysis, and interpretation of the data.
- Identify "data champions" within your program and at the leadership level of your organization who can advocate for data collection and help create buy-in from others.
- Share data at staff meetings in a way that staff will find useful. One of the greatest ways to create buy-in and foster the value of data collection is to present to staff the meaningful data that have been collected. Here are a few examples:
 - Provide reports that allow home visitors to notice trends in their own data and include these staff members in the analysis and interpretation of their data. Home visitors have a unique perspective and are knowledgeable of key information that can be used to better interpret and understand the data being collected. It can be really important to include them in the process to fully understand what the data are telling you about families and the program.
 - Use the data being collected to validate all the hard work home visitors do with families in their community. For example, provide home visitors with data highlighting an increase in the number of home visits completed from the previous month to the current month or share the percentage of parents in their caseload who increased their knowledge of child development over the past year. It's a great way to recognize and motivate your staff.
 - Highlight the most significant findings in the data and provide home visiting staff with information they can use in their work. Data can help home visitors understand family needs and plan their home visits. Home visitors can also share data with families to increase engagement or show progress toward individual goals.

DATA COLLECTED FOR THE TRIBAL MIECHV PROGRAM

Within the Tribal MIECHV Program, different types of data are being collected, including demographic, performance measurement, CQI, and evaluation data. Home visitors and other data collectors need to understand the purpose of each type of data and be able to explain it clearly to families. Home visitors are often the ambassadors of our programs. Their ability to clearly explain the data collection process to participating families and community members promotes trust and willingness to participate. The box on the next page provides more information.

TYPES OF DATA COLLECTED FOR TRIBAL MIECHV

Needs assessment data: Tribal MIECHV programs conduct a needs assessment to inform the development of their home visiting program. The needs assessment provides data on the grantee's community, including demographics, geography, strengths, risk and protective factors, and population characteristics.

Demographic data: These data help describe a person and her or his location. Typically, demographic data include information about participants such as gender, age, ethnicity, languages spoken, transportation access, marital status, education and employment status, number of children, and place of residence. Demographic data are essential for knowing about the individuals who are participating in your program. You can review these data to make sure you are reaching all of the intended community members and to decide how the program can be improved to meet the needs of participants. Demographic data help program staff and funders know whether services are reaching families that most need home visiting services.

Performance measurement data: All MIECHV grantees are required by the federal legislation to measure, track, and report data in six benchmark areas related to home visiting outcomes. Within these areas, grantees can select specific indicators that are most meaningful to their community. The six areas are (1) improvements in maternal and newborn health; (2) prevention of child injuries, child abuse, neglect, or maltreatment, and reduction of emergency room visits; (3) improvements in school readiness and achievement; (4) reduction in crime or domestic violence; (5) improvements in family economic self-sufficiency; and (6) improvements in the coordination and referrals for other community resources and supports. The purpose of the benchmark requirement is for grantees to understand their families' needs and measure potential improvement over time in these key areas. These six benchmark areas were identified because they are considered cornerstones of healthy development and well-being for all children and families. Data on program implementation (i.e., dosage, supervision) will be part of the new performance measurement requirement.

Continuous quality improvement data: Grantees are required to use data and an ongoing Plan-Do-Study-Act (PDSA) cycle to improve program processes. CQI relies on different types of data, depending on the focus of the improvement project. Often times, grantees collect and use data on participant recruitment and enrollment, the number and frequency of home visits, participant retention and engagement in services, or short-term participant outcomes. Data collected for performance measurement, evaluation, and program management can be used in CQI, or programs can choose to collect new, additional data depending on the topic of their CQI project.

Evaluation data: MIECHV grantees are also required to develop and answer an evaluation question related to the priorities of their community using rigorous evaluation methods. Through this work, grantees can explore an issue that is particularly important to them and, at the same time, contribute new knowledge about home visiting implementation and impact in tribal communities.

MODULE SUMMARY

You already collect a lot of data, whether informally or formally. Ensuring that all staff understand what data are, how they are collected, and how they can be used by your program is the first step to helping everyone appreciate the value of data and commit to collecting highquality data.

In the next module, we will describe the process of planning for data collection and share some tools to help you and your team prepare to collect high-quality data.

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APPENDIX

DEFINITIONS OF KEY TERMS

Key Term	Definition
Administrative Data	Information collected primarily for administrative (not research) purposes. This type of data is collected by government departments and other organizations for the purposes of registration, transaction, and record keeping, usually during the delivery of a service. They can be data from third-party agencies and are often abstracted from databases outside of the home visiting program, such as medical or birth certificate records.
CQI	Continuous quality improvement, a strategy for thoughtfully using data to improve services by testing small, measurable changes. CQI often relies on a framework, such as the Plan-Do-Study-Act (PDSA) cycle, for understanding a problem and testing a solution.
Demographic Data	Information that helps describe a person and his or her location, including gender, age, ethnicity, languages spoken, transportation access, marital status, education and employment status, number of children, and place of residence.
Electronic Medical Records	EMR, digital records of a patient's health information, such as medical and treatment history.
Evaluation Data	Information that helps build on the body of knowledge surrounding the implementation or impact of a program.
Focus Group	A method of collecting qualitative data in which a group of people are verbally asked about their experience, perspectives, feelings, or opinions at the same time.
Indigenous Knowledge	Local knowledge that is unique to a certain culture, region, or indigenous community.
Interview	A method of collecting qualitative data that is used to gather information verbally on a person's experience, perspectives, feelings, or opinions.

Key Term	Definition
MIECHV Program	Maternal, Infant, and Early Childhood Home Visiting Program, a program of the U.S. Department of Health and Human Services (HHS) Health Resources and Services Administration (HRSA) and Administration for Children and Families (ACF). It supports pregnant women and families and parents of children from birth to age five by providing evidence-based home visiting programs that support the development of skills needed to raise children who are physically, socially, and emotionally healthy and ready to learn.
Needs Assessment	The collection of data to learn about the particular needs of a specific community or group to ensure that program activities directly address these needs. It can include an assessment of strengths and resources.
Observational Measures	Measures used to collect data that involve a data collector directly watching or observing participants' behaviors or setting. These measures capture the home visitor's views or ratings of what he or she observes in the parent, child, relationship, and/or home environment. Examples include the HOME Inventory observational tool.
Performance Measurement Data	Data regularly collected on program processes and client outcomes to determine whether programs are improving on various indicators.
Self-Report	A type of data collection that requires individuals to report data about themselves.
Stakeholder	A person, group, or organization that has interest in or is impacted by the activities of a program or other organization.
Survey	A tool to collect data using a set of questions for a participant to answer. Surveys can be administered using various methods: with paper and pencil, verbally, electronically, and with audio.
Qualitative Data	Data that can be observed (e.g., attitudes, feelings, behaviors) but not counted. They are often expressed through words or descriptive language. Examples include eye color, make and model of a car, and gender.
Quantitative Data	Data that can be counted or measured and are expressed in numbers. Examples include height, weight, and test scores.

ACTIVITY INDEX

Activity	Purpose of Activity
1.1: Quantitative vs. Qualitative Data	Understand the difference between quantitative and qualitative data home visitors typically collect in the home.
1.2: Identifying Questions Data Can Help You Answer	Determine the questions your stakeholders might have about your program and the data your program could collect from families to answer them.
1.3: Recognizing Informal Data Collection	Recognize the informal data home visitors collect all the time.

ACTIVITY 1.1: QUANTITATIVE VS. QUALITATIVE DATA

With this activity, you can briefly practice identifying the different types of data home visitors may be collecting in the home.

Instructions: Classify the following as quantitative or qualitative data.

Scenario	Type of Data
Example: Number of children living in the home.	Quantitative
1. Scale score recorded for the Ages & Stages Questionnaire (ASQ).	
2. Family's type of housing (e.g., apartment, house, shelter).	
3. Mother's rating of stress levels using the Everyday Stress Index (ESI).	
4. Mother's current employment status (e.g., employed, unemployed, student, retired).	
5. The number of prenatal visits completed.	

Answer key: 1. Quantitative 2. Qualitative 3. Quantitative 4. Qualitative 5. Quantitative

ACTIVITY 1.2: IDENTIFYING QUESTIONS DATA CAN HELP YOU ANSWER

In this activity, you will think through the questions that different groups of stakeholders might have about your program. Keep these questions in mind and consider how the data you're collecting can help you answer them.

Instructions: Think about and write down the questions that these different groups of people might have about your program and what it's accomplishing.

COMMUNITY MEMBERS:

TRIBAL COUNCIL:

LOCAL PROGRAM PARTNERS:

FUNDING AGENCIES:

PROGRAM DIRECTORS:

CLIENTS/FAMILIES:

Think about the questions you, as a home visitor, might have about your program and its achievements.

ACTIVITY 1.3: RECOGNIZING INFORMAL DATA COLLECTION

This activity gives you practice in recognizing the informal data collection home visitors may conduct regularly without even realizing it. This activity can help build confidence in data collection skills by showing that team members already ask good questions and participate in data collection all the time.

Instructions: Read each quotation, then list the data you can collect to help serve the family better.

Quotation	Data
Example: "Having my son has been the best thing that's ever happened to me, even if I have to do it alone without his dad. My mom helps out. I want to finish high school and then go to college and make my son proud."	This is a young, single mother and a high school student; the father is not involved with the family; grandmother is a support person for mom and the baby; education is a priority; mom has goals for college; she enjoys being a mother but may need more support.
Nathan: "I'm not from around here and only know a few people in the area. My kids are both enrolled in the tribe's daycare program, and my wife is currently looking for a job. She's a certified nursing assistant."	
Mary: "Well, we're trying to find our own place that's close to the tribal college, because we don't have a car. Right now, we live with my grandparents in their home, but it gets too crowded. As soon as the baby comes, we'll need our own privacy."	
Jen: "My son and I have health insurance through our tribe, but my husband lost his insurance when he got laid off from his job about a year ago. Honestly, the only time my husband has seen a doctor is in the emergency room. He also doesn't trust strangers coming into our home to ask us questions. What should I tell him?"	

Think about the last real conversation you had with a client or family. What pieces of data were shared with you?